

Please type a plus sign (+) inside this box ☐

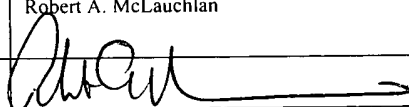
PTO SB/05 (12/97)

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> | | Attorney Docket No. 1017.P075US First Named Inventor or Application Identifier Ronnie J. Lindley, et al. Title HIGH VOLTAGE INTERFACE MODULE Express Mail Label No. EF 413 316 676 US | |
| APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents | | ADDRESS TO: Mail Stop: Patent Applications Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450 | |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages] 18 <small>(preferred arrangement set forth below)</small> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets] 4 5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages] 3 <small>(including Supplemental Declaration)</small> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, See 37 CFR §1.63(d)(2) and 1.33(b) 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | | 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies. | |
| ACCOMPANYING APPLICATION PARTS | | | |
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & Documents(s)) 10. <input type="checkbox"/> 37 CFR §3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/ PTO-Form 1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 USC 122(b)(2)(b)(i). Applicant must attach Form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____ | | | |
| 18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Prior application information: Examiner: _____ Group / Art Unit: _____ <small>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</small> | | | |
| 19. CORRESPONDENCE ADDRESS | | | |
| <input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or <input type="checkbox"/> Correspondence address below | | | |
| NAME | | Koestner Bertani LLP | |
| ADDRESS | | P.O. Box 26780 | |
| CITY | Austin | STATE | Texas |
| COUNTRY | US | TELEPHONE | 512-339-4100 |
| | | ZIP CODE | 75755 |
| | | FAX | 512-692-2529 |
| Name (Print/Type) | | Robert A. McLauchlan | Registration No. (Attorney/Agent) |
| Signature | |  | Date |
| | | | September 11, 2003 |

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S. PRO

FEE TRANSMITTAL FOR FY 2003

Patent Fees are subject to annual revision.

Applicant claims small entity status.
See 37 CFR 1.27

| | |
|-------------------------|---------------------------|
| Application Number | Unknown |
| Filing Date | Unknown |
| First Named Inventor | Ronnie J. Lindley, et al. |
| Examiner Name | Unknown |
| Group / Art Unit | Unknown |
| Total Amount of Payment | \$ 862.00 |
| Attorney Docket No. | 1017.P075US |

METHOD OF PAYMENT (check all that apply)

☐ Check
 ☒ Credit Card
 ☐ Money Order
 ☐ Other
 ☐ None
Delivered per customer charge as below (Sheet 9/14/03)
☐ Deposit Account:
 Deposit Account No.: 50-2240
 Deposit Account Name: Koestner Bertaini, LLP

The Director is authorized to: (check all that apply)

☐ Charge any fee(s) indicated below
 ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below (except for the filing fee) to the above identified deposit account.

FEE CALCULATION

1. Basic Filing Fee

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|------------------------|-----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1001 | 750 | 2001 | 375 | Utility Filing Fee | \$ 750.00 |
| 1002 | 330 | 2002 | 165 | Design Filing Fee | \$ |
| 1003 | 520 | 2003 | 260 | Plant Filing Fee | \$ |
| 1004 | 750 | 2004 | 375 | Reissue Filing Fee | \$ |
| 1005 | 160 | 2005 | 80 | Provisional Filing Fee | \$ |
| Subtotal (1) | | | | | \$ 750.00 |

2. Extra Claim Fees

| Claims | | Extra | | Fee (below) | Fee Paid |
|--------------------|-----------|-------|---|-------------|------------|
| Total | 24 - 20 = | 4 | x | \$ 18.00 | = \$ 72.00 |
| Indep. | 3 - 3 = | | x | \$ 84.00 | = |
| Multiple Dependent | | | | | |

| Large Entity | | Small Entity | | Fee Description | |
|--------------|----------|--------------|----------|-----------------------------------------------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 | |
| 1201 | 84 | 2201 | 42 | Independent claims in excess of 3 | |
| 1203 | 280 | 2203 | 140 | Multiple dependent claim, if not paid | |
| 1204 | 84 | 2204 | 42 | **Reissue independent claims over original patent | |
| 1205 | 18 | 2205 | 9 | **Reissue claims in excess of 20 and over original patent | |
| Subtotal (2) | | | | | \$ 72.00 |

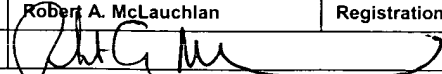
**or number previously paid, if greater. For Reissues, see below

FEE CALCULATION (continued)

3. Additional Fees

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|------------------------------------|----------|--------------|----------|----------------------------------------------------------------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1051 | 130 | 2051 | 65 | Surcharge - late fee or oath | \$ |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet | \$ |
| 1053 | 130 | 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | 1812 | 2,520 | Request for Reexamination | \$ |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | \$ |
| 1805 | 1840* | 1805 | 1840* | Requesting publication of SIR after Examiner action | \$ |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month | \$ |
| 1252 | 400 | 2252 | 200 | Extension for reply within second month | \$ |
| 1253 | 920 | 2253 | 460 | Extension for reply within third month | \$ |
| 1254 | 1,440 | 2254 | 720 | Extension for reply within fourth month | \$ |
| 1255 | 1,960 | 2255 | 980 | Extension for reply within fifth month | \$ |
| 1401 | 320 | 2401 | 160 | Notice of Appeal | \$ |
| 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal | \$ |
| 1403 | 280 | 2403 | 140 | Request for oral hearing | \$ |
| 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | |
| 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | \$ |
| 1453 | 1,280 | 2453 | 640 | Petition to revive - unintentional | \$ |
| 1501 | 1,280 | 2501 | 640 | Utility issue fee (or reissue) | \$ |
| 1502 | 460 | 2502 | 230 | Design issue fee | \$ |
| 1460 | 130 | 1460 | 130 | Petitions to the Commissioner unless otherwise specified | \$ |
| 1807 | 50 | 1807 | 50 | Statutory Disclaimer | \$ |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Statement | \$ |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | \$ 40.00 |
| 1809 | 740 | 2809 | 370 | Filing a submission after final rejection (37 CFR 1.129(a)) | \$ |
| 1810 | 740 | 2810 | 370 | For each additional invention to be examined (37 CFR 1.129(b)) | \$ |
| 1801 | 740 | 2801 | 370 | Request for Continued Examination (RCE) | \$ |
| 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | \$ |
| Other fee (specify): | | | | | \$ |
| * Reduced by Basic Filing Fee Paid | | | | | |
| Subtotal (3) | | | | | \$ 40.00 |

SUBMITTED BY

| | | | | | |
|-------------------|-------------------------------------------------------------------------------------|------------------|--------------------|-----------|----------------|
| Name (Print/Type) | Robert A. McLauchlan | Registration No. | 44,924 | Telephone | (512) 339-4100 |
| Signature |  | Date | September 11, 2003 | | |

Complete (if applicable)